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DEC 08 2005

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FEE TRANSMITTAL For FY 2005

Effective 12/08/2004.
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$) **800.00**

Complete if Known

Application Number	10/618,117
Filing Date	11 July 2003
First Named Inventor	C. S. Slone, et al.
Examiner Name	D. S. Metzmaier
Art Unit	1712
Attorney Docket No.	06147D USA

METHOD OF PAYMENT (check all that apply)

Check Credit Card Money Order None Other (please identify): _____

Deposit Account Deposit Account Number: **01-0493** Deposit Account Name: **Air Products and Chemicals, Inc.**

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

<input checked="" type="checkbox"/> Charge fee(s) indicated below	<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17	<input checked="" type="checkbox"/> Credit any overpayments

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FEE CALCULATION
1. BASIC FILING, SEARCH, AND EXAMINATION FEES

<u>Application Type</u>	<u>FILING FEES</u>		<u>SEARCH FEES</u>		<u>EXAMINATION FEES</u>		<u>Fees Paid (\$)</u>
	<u>Fee (\$)</u>	<u>Small Entity</u>	<u>Fee (\$)</u>	<u>Small Entity</u>	<u>Fee (\$)</u>	<u>Small Entity</u>	
Utility	300	150	500	250	200	100	_____
Design	200	100	100	50	130	65	_____
Plant	200	100	300	150	160	80	_____
Reissue	300	150	500	250	600	300	_____
Provisional	200	100	0	0	0	0	_____

2. EXCESS CLAIM FEES
Fee Description

Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent

Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent

Multiple dependent claims

<u>Small Entity</u>	
<u>Fee (\$)</u>	<u>Fee (\$)</u>
50	25
200	100
360	180

Total Claims Extra Claims Fee (\$) Fee Paid (\$)

- 20 or HP = _____ x 50 = 0

HP = highest number of total claims paid for, if greater than 20

Multiple Dependent Claims

Fee (\$) Fee Paid (\$)

Indep. Claims Extra Claims Fee (\$) Fee Paid (\$)

- 3 or HP = _____ x 200 = 0

HP = highest number of independent claims paid for, if greater than 3

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)

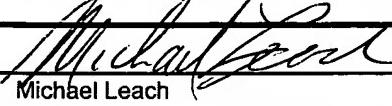
- 100 = _____ / 50 = _____ (round up to a whole number) x 250 = 0

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other: 4 Extra Independent Claims 800.00

SUBMITTED BY

Signature		Registration No. (Attorney/Agent) 27,349	Telephone (610) 481-8519
Name (Print/Type)	Michael Leach	Date	6 December 2005

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Appl. No. : 10/618,117 Confirmation No.: 4103
Applicant : C. S. Slone et al
Filed : 11 July 2003
For : Alkyl Glycidyl Ether-Capped Polyamine Foam Control Agents

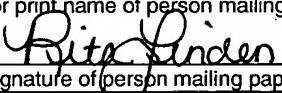
Art Unit : 1712
Examiner : D. S. Metzmaier

Docket No. : 06147D USA
Customer No. : 23543

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

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Signature of person mailing paper	

Amendment Under Rule 111

Sir:

The following is responsive to the Office Action dated 5 October 2005:

- A *insert length of time* extension of time is requested and authorization to charge the Account of assignee is provided in an enclosed form.
- Amendments to the Specification** begin on page 2 of this paper.
- Amendments to the Claims** are reflected in the listing of claims which begins on page 3 of this paper.
- Amendments to the Drawings** begin on page _____ of this paper and include an attached replacement sheet(s).
- Amendments to the Abstract** are on page _____ of this paper. A clean version of the Abstract is on page _____ of this paper.
- Remarks/Arguments** begin on page 9 of this paper.